T. CZEHOWSKI

PERSONAL INFORMATION:

LENGTH OF RESIDENCE IN NEVADA:



Please read the instruction before completing. Attach additional sheets if necessary. DEC 2 2 2008

COMMISSION ON ETHICS

6900 ROSE PETAL AUE							
CITY, STATE, ZIP: LAS VEGAS, NV 89130		LENGTH OF RESIDENCE IN DISTRICT WHERE REGISTERED TO VOTE: 6 VERPS					
TELEPHONE: 702 486-9044		E-MAIL: CZEHOWSKI , toM @ dol. gov					
SECTION A (Public Office): List all public offices for which this and check each box accordingly i.e. annual, candidate or appoint		disclo	sure stater	nent is require		J	
Title of Public Office and Name of Government	<u>ल</u> 📆 .	(E, A, AE)	Annual Compensation	Date elected or appointed	ANNUAL NRS 281A,600,1 & 281A,610,1	CANDIDATE NRS 2 81 A.610.1(a).	APPOINTMENT NRS 281A,600,1
					Check the	appropriate t	oxes below
CHIEF AdmiNATRATIVE OFFICER NV OSHA	A	\$8	7,000	2-1-01	V	······································	/
BII/DIR/OSHA		\$					_
-		\$					
SECTION B (Sources of Income): List each source of your incomental many member of your household who is 18 years of age or older.		A.620		arce listed in S	·	Ho	ousehold lember opropriate
STATE OF NEVADA WELFARE D	111510	<i>\(\mu\)</i>					
SECTION C (Real Property): List specific location and particular use of all real estate (other than personal residence): (1) in which you or a member of your household has a legal or beneficial interest; (2) the fair market value of which is \$2,500 or more; and (3) located in this state or an adjacent state. NRS 281A.620.1(c). Specific Location Particular Use							
NONE.	· · · · · · · · · · · · · · · · · · ·						
				-			

Name of Public Officer: LARRY T.	CZEHOWSKI	
SECTION D (Creditors): List each creditor to wh	nom you or a member of your household owes \$5,000 o our personal residence; and (2) debt on a motor vehicle	r more [EXCEPT: (1) for personal use Household Self Member
		Check the appropriate
NONE		boxes
you within the third degree of consanguinity or a		on who is related to vedding, ur legislative,
NONE	Donor	Value of Gift
7-0-6		\$
		\$
		\$
you or a member of your household is involved a	ess entity (i.e., organization or enterprise operated for einess, trust joint venture, syndicate, corporation or assocas a trustee, beneficiary of a trust, director, officer, owner stock or security representing 1% or more of the total of 1A.620.1(f).	clation) with which
		Househald Self Member
		Check the appropriate
NONE		boxes
THE INFORMATION I HAVE PROVIDED HEREIN	N IS ACCURATE AND COMPLETE.	7
Date: December 22, 2008	Signature: Joney J.	<u></u>
F	Print Name: KARRY T. CZEHOWS	4.7
WHERE TO FILE:	,	
APPOINTED PUBLIC OFFICERS SUBMIT TO:	ELECTED PUBLIC OFFICERS OR CANDIDATES SUBMIT TO:	
Nevada Commission on Ethics 3476 Executive Pointe Way, Suite 10	Nevada Secretary of State, Elections Division 101 North Carson Street, Suite 3	

NEVADA FINANCIAL DISCLOSURE STATEMENT Page 2 of 2

Carson City, Nevada 89701

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